# **CENTRAL FAX CENTER**

### FACSIMILE COVER SHEET

JUN 2 1 2005

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Date: June 21, 2005

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FAX NO.: 703-872-9306

FROM: Robyn Wagner

RE: Change of Correspondence Address Request

REF. NO.: CFSTP001

PATENT APPLICATION NO.: 09/885,076

NO. PAGES: 3

#### **MESSAGE:**

Dear Official Fax Filing:

Please accept the enclosed Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address, for the above-referenced application.

Best Regards.

Robyn Wagner

## RECEIVED CENTRAL FAX CENTER

JUN 2 1 2005 PATENT

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

<u>In re</u> application of:	)	Attorney Docket No.: CFSTP001
Kevin W. Jameson	)	
Patent Application No.: 09/885,076	)	
Filed: June 21, 2001	)	Date: June 21, 2005
For: COLLECTION CONTENT CLASSIFIER	)	
	)	· ·

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to the Patent and Trademark Office on June 21, 2005 Signed:

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is the Power of Attorney by Assignee and Revocation of Previous Powers for the above-entitled matter.

Applicant(s) believe that no fee is required; however, if it is determined that such fee is required, Applicant(s) hereby authorize the Commissioner to charge the required fees Deposit Account No. 50-0685 (CFSTP001).

Respectfully submitted,

Robyn Wagner

Registration No. 50,575

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PTO/SB/82 (04-05)

Approved for use through 11/30/2005, OMB 0851-0035

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**REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY** AND

**CHANGE OF CORRESPONDENCE ADDRESS** 

Filing Date June 21, 2001 First Named Inventor Kevin W. Jameson **Art Unit** 2121 **Examiner Name** Michael B. Holmes Attorney Docket Number | CFSTP001

09/885,076

I hereby revoke all previous powers of attorney given in the above-identified application.										
A Power of Attorney is submitted herewith.										
OR  I hereby appoint the practitioners associated with the Customer Number:					nber:	21912				
Please change the correspondence address for the above-identified application to:  The address associated with										
Customer Number: 21912										
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City				State				Zip		
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I am the:  Applicant/Inventor.										
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
SIGNATURE of Applicant or Assignee of Record										
Signature L. January										
Name	Kevin W. Jam	eson	·							
Date	June	2/2005			ephone	403			7660	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.										
Yolal of 1forms are submitted.										

This collection of Information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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